



FINANCIAL AID OFFICE
Independent Status Reaffirmation Form

Name:		
Student ID:	Date of Birth:	
Address:		
City:	State:	Zip:
Phone Number:		

The Financial Aid Office has approved your independent status appeal for a previous award year. Federal regulations require that we verify that the **unusual** circumstances between you and your parents have not changed. If the situation between you and your parents has not changed, read the statement below. If you accept the statement, sign this form and return it to the Financial Aid Office.

Certification Statement for Independent Status

I certify that the **unusual** circumstances between my parents and I have not changed. The information provided in my appeal is still true and correct. I agree to notify the Financial Aid Office if the situation between my parent(s) and I changes. If I give false or misleading information on this or any financial aid document, I may be fined, sentenced to jail or both.

Student Signature

Date